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Connecticut Consumer Advisory Board on Healthcare Innovation: Questions Comments and Concerns

The following is a listing of correspondence received and questions/concerns raised at each meeting of the Consumer Advisory Board this year.

January 27, 2014

No correspondence

Questions and concerns raised at meeting

Why is CT developing a new patient centered medical home standard rather than existing national standard?

Can stipends be considered to enable consumers to participate in Work Group process?

Interpreters needed to include experience of non-English speaking consumers.

Concerns about impact of risk sharing proposals in Healthcare Innovation Plan on consumers (both upside and downside risk)

February 11, 2014

No correspondence

Questions and concerns raised at meeting

Concerns about percentage of Consumer Representatives on Work Groups

Need to address language access to gain community feedback.

March 14, 2014

Correspondence from Coalition of Community Advocates dated March 10th expressing concern about inadequate representation of consumers and advocates in SIM process. (need to insert link here)

Questions and concerns raised at meeting. Meeting focused on selection of Consumer Representatives to Work Groups.

March 19, 2014

No correspondence received

No questions or concerns. Meeting focused on selection of Consumer Representatives to Work Groups.

March 21, 2014

No correspondence received

No questions or concerns. Meeting focused on selection of Consumer Representatives to Work Groups.

April 23, 2014

Correspondence received dated opposing under-service language used in the mission statement for the Equity and Access Committee (insert link here)

Received comments on Issues Briefs 1 - 4 from consumer advocates (need to insert link here). These highlight the following concerns:

- Issue Brief #1 (provider surveys): consumer experience of care survey results should be made public, used constructively within practices to address gaps. SIM should provide practices with low scores assistance to improve patient experience of care.
- Issue Brief #2 (payment), concerned with ending payment to providers for care coordination and other important care management services beyond 18 months
- Issue Brief # 3 (glide path administration), concerned about CT abandoning successful national patient-centered medical homes model based on NCQA accreditation and with the consolidation of administration in one new entity.
- Issue Brief # 4 (community integration), concerned with the assumption that a move to much greater consolidation among providers is both inevitable and should be facilitated, when the evidence is mixed about whether such consolidation improves quality or controls costs.

Questions and concerns raised at meeting

Importance of ensuring significant and meaningful consumer participation in healthcare innovation process

CAB recommends adding two additional Consumer Representatives to Equity and Access Council and Practice Transformation Work Group

CAB requests that they participate in defining qualifications, responsibilities and selection of Stakeholder Coordinator.

Will Round Two Funding Opportunity include nursing homes?

May 15, 2014

No correspondence received

No questions and concerns raised regarding SIM proposals. Discussions focused on planning for May 27th Meeting with Consumer Representatives

May 27, 2014 – First meeting with Consumer Representatives of Work Groups

No correspondence received

Questions and concerns raised at meeting

Concerns regarding the number of insurance carriers participating in Work Groups and the influence of payers and providers on reform process

Importance of social determinants of health and role of community based organizations

Need to focus on health promotion and prevention

Need to bring CT standards to national level

Importance of social determinates of health and poverty

Role of Qualified Health Centers

When describing healthcare situations to be addressed, must focus on strengths, not just weaknesses

Importance of school based health services

Regarding glide path administration – Poor performing providers can be the least knowledgeable of need to improve

Need to improve communication provider and patients.

Who will be accrediting body for CT proposed medical home standards and what will the basis for these new standards be?

Given the time and expertise used to develop national accreditation standards, why is CT not using existing accreditation entities?

Concern about the time and expense of CT developing a new medical home standard.

Questions about care experience surveys and expense of using current surveys or developing new ones.

Importance of common measures in care experience surveys and CABs in development

How will minute clinics and scope of practice fit in with practice transformation strategies?

How will consumer experience surveys be conducted and incorporated in the reform process?

Suggestion to look at CT Health Foundation recent survey

How will the Work Groups integrate in the SIM Process

How many practices are currently accredited patient centered medical homes by NCQA?

If so many CT practices are currently transforming using NCQA standard, why change the standard?

Concern providers not required to accept a particular insurance. Will this be addressed as part of SIM?

How does CT envision care experience surveys and how they will be implemented?

Need for statewide evaluation requirements.

Quality measures need to be different for men and women and adults and children.

Will healthcare innovation focus only on advanced medical home or the healthcare system as a whole?

Importance of consumers having access to information and other resources besides medical homes and not working in silos

What access to data bases and information sources will be available to consumer representatives to Work Groups?

What communication structure will Work Groups use? How will language access be addressed in order to gain community feedback?

How will governance get others to buy into the work?

June 11, 2014

Correspondence received from Ellen Andrews, Executive Director of CT Health Policy Project responding to request for Issue Brief topics. (need to insert link here) Suggested topics include how CT Health Care Innovation Plan will

- Track and protect vital safety net functions and providers to ensure no harm is done to most fragile residents
- Ensure patient centered medical homes
- Ensure that payment and delivery reforms will integrate with public health, behavioral health, oral health and other systems of care to ensure independence and coordination
- Monitor conflicts of interest
- Develop a detailed plan for Advanced Medical homes Standards and reasons for abandoning national standards how CT will address possible gaps in standards.

Questions and concerns regarding CT plan to develop a new patient centered medical home standards, public health integration and important role of CT Navigator and Assistors in Community Health Worker program.

June 16, 2014

Because of the rapid time frame for drafting CT SIM grant applications, Consumer Advisory Board will begin listing correspondence, comments and questions on a weekly basis.

Correspondence

CT Health Policy Project Report titled Patient Centered Medical Homes in CT: Why National Standards Matter This report describes the importance of national standards, the benefits of NCQA accreditation, and the risks of to consumers if CT goes forward without a national standard. (need to insert link here)

Comments and Questions on Draft Grant Narrative & Issue Briefs

Robert Krzys suggestions on consumer engagement process and preliminary comments on Issue Brief 8 (see email attachment)

Alice Ferguson comments and questions on Issue Briefs 6, 7, 8, (see email attachment)

Theanvy Kuoch comments and questions on Issue Brief #8 (see email attachment)

Steve Karp comments and questions on Issue Briefs 5, 6, 7 9 (see email attachment)

Pat Checko's comments and question on Issue Briefs 6,7,8 (see email attachment)

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